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## Items of Interest:

**Chiropractic Care Program.** The National Defense Authorization Act for fiscal year 2001 established the Chiropractic Care Program. This program is only available to active duty service members at designated military treatment facilities (MTFs). Active duty service members may be treated by a chiropractic provider for neuro-musculoskeletal conditions at if referred by their primary care manager. During the course of treatment, the primary care manager will determine if specialty care (traditional or chiropractic care) is required. If chiropractic care is considered an option, the patient will undergo a screening process to rule out any medical conditions that would prohibit chiropractic care. For more information about the Chiropractic Care Program, please visit the TRICARE Web site at [www.tricare.osd.mil](http://www.tricare.osd.mil).

# Navy and Marine Corps Medical News

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## Transformation Office to Streamline Military Health System

By Samantha L. Quigley, American Forces Press Service

**WASHINGTON** - Service members can rest easy that their health care benefits will only improve with the chartering of the Military Health System Office of Transformation, the director of the new office said Sept. 16.

"It's important that service members and their families know that they are meant to be the focus of this patient-oriented system of the future," Rear Adm. John Mateczun, Navy Deputy Surgeon General, said. "There is no intent to lessen the health care delivery that they would see today."

Patients of the military health care system should notice a more patient-focused manner of delivering service, he said.

The Defense Department announced Aug. 31 acting Deputy Defense Secretary Gordon R. England



**WASHINGTON—** Rear Adm. John Mateczun, Director, Military Health System Office of Transformation and U.S. Navy Deputy Surgeon General. Navy Bureau of Medicine and Surgery file photo

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**NAVAL AIR STATION (NAS) JOINT RESERVE BASE (JRB) NEW ORLEANS, La.** - Preventative Medicine Technician (PMT), Hospital Corpsman 1st Class Jonathan Wells, assigned to Forward Deployable Preventive Medicine Unit (FDPMU) East, removes a Light Trap provided by the Centers for Disease Control (CDC) from a tent city area on board NAS JRB New Orleans. The FDPMU is assisting the CDC and the Louisiana Department of Public Health to eliminate vector-borne disease and other insect-related problems associated with Louisiana's mosquito population. Diseases like West Nile Virus can be transmitted by mosquitoes, which thrive in wet ecological terrain like that inherent to Louisiana. U.S. Navy photo by Journalist 1st Class James Pinsky

## New Navy Chief with Cancer Anchored In Shipmates' Support

By Ellen Maurer, National Naval Medical Center, Bethesda, Public Affairs

**BETHESDA, Md.** — Newly promoted Chief Hospital Corpsmen Marco Martinez received his anchors during a special ceremony Friday, Sept. 16 at the National Naval Medical Center where he has battled cancer for the past seven months.

Martinez, who is assigned to the Bureau of Medicine and Surgery (BUMED) in Washington, was diagnosed with a rare form of leukemia in February, shortly after checking aboard Navy Medicine's headquarters command.

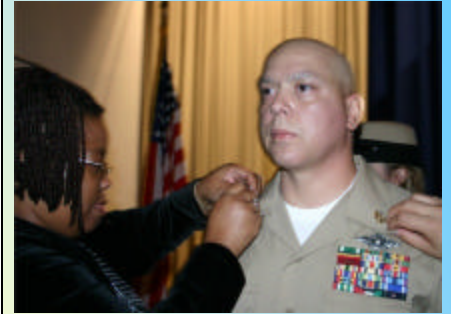
"One month...one month... I'd only been checked on board for one month before I got sick," Martinez recalled. "It didn't matter because when I got sick, everyone just showed up here with balloons and all the support you could imagine."

The Boston-native Sailor confesses the disease has slowed him down, but it hasn't stopped him or his Navy career. Martinez proved that point Friday when he ceremoniously pinned on his chief's anchors at Bethesda where he is currently an in-patient.

Martinez admits he was disappointed he couldn't participate in the standard chief's indoctrination, a time-honored tradition where "chief selects" pass through a series of challenges before receiving the rank of chief petty officer. However, he said hopes to be healthy enough to "take off his anchors" and complete the indoctrination with new selectees next year.

"I've never backed down or tried to go around anything that I need to go through," Martinez said. "I guess I'm going through my own personal trials right now."

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**NATIONAL NAVAL MEDICAL CENTER, BETHESDA, Md.**—Hospital Chief Marco Martinez receives his new "chief's anchors" from his wife, Jewel, at a promotion ceremony at the National Naval Medical Center. Martinez, a staff member at the Bureau of Medicine and Surgery, is currently an in-patient at the hospital where he has battled leukemia since February. U.S. Navy Photo by Ellen Maurer

## Naval Hospital Great Lakes Corpsman Receives Purple Heart

By Culinary Specialist 2nd Class William Reed, Naval Hospital Great Lakes Public Affairs



**GREAT LAKES, Ill.**—Hospital Corpsman 3rd Class (SW) Carlos Miranda proudly displays his Purple Heart Award. U.S. Navy photo by Hospital Corpsman 1st Class D. Snader

**GREAT LAKES, Ill.**—Hospital Corpsman 3rd Class (SW) Carlos Miranda received one of the military's highest awards, the Purple Heart, Sept. 15. Miranda deployed Jan. 10 from Naval Hospital Great Lakes to Iraq as part of the 3rd battalion, 3/25 Marine Division, 4th Platoon Kilo Company.

"Miranda is very humble but clearly a hero. Like so many others from our command, he has served our country well and we are proud of him and all who serve in harms way," said Capt. Michael H. Anderson, commanding officer, Naval Hospital, Great Lakes, Ill.

Just after standing-down from his patrol duty, Miranda, his camp and his platoon came under attack April 17th. When a mortar exploded, a piece of shrapnel struck him in the left hand. Looking around and in shock, Miranda wrapped his wound and went to his battalion station. He was immediately evacuated to a medical staging point inside Iraq. He was later transported to Germany, Washington, D.C. and then back to the Great Lakes Naval Hospital.

He added "During those times of difficulty, I thought about my mother. She has always been a source of strength for me."

Miranda was quickly released from the Naval Hospital Great Lakes so that he could return home to his parents Lili and Carlos Miranda.

"I have always known, because of my job, that one day I might eventually be called upon to support our Marines, but I never knew exactly when," he said.

## Corpsman Walks Beat with Marines

By Pfc. Michael S. Cifuentes, Marine Corps Air Ground Combat Center

### TWENTYNINE PALMS, Calif. -

For each step a Marine takes during wartime or peacetime operations, there is a shadow following them, taking the very same steps Marines take. Marines patrol threatening streets, engage in firefights, convoy from place to place-risking their lives. That shadow walks the walk with them.

The men and women who shadow, guard, protect and serve with the Marines are known as hospital corpsmen. These enlisted U.S. Navy service members are trained to give first aid and medical treatment during combat situations and training.

They train with them, live with them, fight with them, eat with them and serve by their side while providing their medical care.

Hospital Corpsman 1st Class Adrian L. Robinson enlisted in the Navy 14 years ago. Robinson has been serving as a Combat Center independent duty hospital corpsman with Combat Logistics Battalion 7, since Dec. 15, 2004.

"I needed a new direction in my

life," said Robinson. "The Navy was my answer."

Since his enlistment, Robinson served in two campaigns, Operation Bright Star in 2001 and Operation Iraqi Freedom I. He has deployed five times extending to eight countries.

Throughout Robinson's career, he has accumulated 14 ribbons, to include three Navy and Marine Corps Achievement Medals, and maintains his expert marksmanship skills with a pistol and rifle.

After boot camp, Robinson went on to Navy Corpsman and Field Medical Service School. He extended his medical skills by completing courses in Combat Trauma Medicine, emergency medical technician, fleet hospital and Independent Duty Corpsman School.

Robinson also expanded his ambition in field medicine by completing more challenging schools like Pre-Ranger and Ranger course, Desert and Jungle Survival School, Special Weapons and Tactics Academy, Provost Marshal Officer pre-service course and the Combat Casualty Care Course in Camp Pendleton.

He was also trained by Army



**EN ROUTE to AD-DIWANIYAH, Iraq -** Hospital Corpsman 1st Class Adrian L. Robinson and an unidentified corpsman (kneeling), pose for a photo with an Iraqi citizen and his son during Operation Iraqi Freedom 2003. Robinson was attached to a civil affairs group en route to Ad-Diwaniyah, Iraq for more combat operations. U.S. Navy photo

Special Forces, North Atlantic Treaty Organization Forces, German Special Forces and Naval Special Warfare; and trained with German and French snipers, the Federal Bureau of Investigation Hostage Rescue Team, Special Raiding Squadron, Special Reactions Team.

## Transformation continued...

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chartered the new office to reform military health services. Eight people will make up the new office: two each from the Army, Navy and Air Force, and two from the Tricare Management Activity.

Mateczun likened the changing system to building a house. "What is to be included in the house as well as the materials to be used must be decided upon," he said.

"You still have to have somebody transform that into a plan so the contractors and subcontractors will know exactly what to do," he said. "That's what the Office of Transformation's job is going to be. It's kind of like an architect. It's taking the building blocks that have

been put together and then drawing the plan."

From that plan, Mateczun said, a team that includes the Office of the Secretary of Defense, the services and the Tricare Management Activity will be able to build the new military health system of the future. They will get their raw materials, or building blocks, from the base realignment and closure process, local working group recommendations and medical readiness review initiatives, he said.

"When all those building blocks come together, you'll have four or five different views of how the system needs to transform," he continued. "What this office will do will be to take all of those and put them together into a blueprint that the

team will evaluate to make sure we build the system we need for the future."

"That future," Mateczun added, "is a military health system that is efficient and can capitalize on the new technologies and drugs that are a result of a constantly changing American health system."

"We want to maintain the very high standard of both battlefield care and the health care systems we have today worldwide," Mateczun said. "But at the same time, we wanted to ensure we're doing it as efficiently as we can by being good stewards of the money the American people provide."



## Corpsmen Earn Army Medals for Joint New Orleans Missions

By Rod Duren, Naval Hospital  
Pensacola Public Affairs

**PENSACOLA, Fla.** - Three Navy corpsmen on duty within the East Bank Branch Health Clinic in downtown New Orleans developed an "exceptional partnership" with the medical staff of the Army's 82nd Airborne during the aftermath of Hurricane Katrina and were each awarded the Army Achievement Medal Sept. 13.

Chief Hospital Corpsman Shawn Frederick of the Naval Ambulatory Care Clinic (NACC) on the West Bank in New Orleans, Hospital Corpsman 2nd Class Thomas Santos and Hospital Corpsman 2nd Class Scott Moore, both of Naval Hospital (NH) Pensacola, Fla., were presented the medals by the 82nd Airborne for their efforts during missions beginning Sept. 6, to clear a nursing home, Tulane and Charity hospitals, and the Superdome.

Frederick "struck up an exceptional partnership with the medical staff of the 82nd," said Capt. Sharon McDonald, NACC Officer-in-Charge.

The Army medical staff included

a doctor, physician assistant and 10 medics.

"We knew that they were coming, but didn't know what to expect prior to their arrival," said Moore. "But, shortly after, we meshed really well and became one cohesive unit. It was as though we trained together, because we were doing the same thing side by side."

The corpsmen augmented the 82nd staff and "began going out on missions with them," continued McDonald. "Frederick went with the Airborne to clear a nursing home, while Santos and Moore were on missions at the Superdome and Convention Center shortly after hurricane evacuees were cleared from those shelter sites, yet well before anyone arrived to begin cleanup of the facility."

The mission to clear Tulane and Charity hospitals began shortly after the facilities had been evacuated; there they found casualties.

They also went on foot-patrol missions throughout the non-flooded French Quarter, which sits on higher ground.

"It was quite the learning experience," Moore said. "We per-

formed sick call for the troops (Navy and 82nd), we cleared hospitals, boat patrols, and performed preventive medicine type tasks."

Moore and Santos, who arrived as part of a six-person contingent from NH Pensacola Sept. 1, returned to Pensacola by helicopter Sept. 14. Frederick, an independent duty corpsman, remains on duty in the New Orleans area.

The Army's 82nd Airborne and 1st Cavalry divisions and the 1st and 2nd Marine Expeditionary forces were in New Orleans conducting humanitarian assistance, search and rescue, evacuation and security assessments.

"It was a memorable experience and I consider it an honor to have served with the 82nd Airborne," said Moore. "I have walked away from this experience not only learning more about the unit and how the Army works, but I now have much more respect for the Army, especially the 82nd. If given the chance, I would gladly serve with them again without hesitation."

## Shreveport Medical Team Immunizes More Than 1,000 Hurricane Relief Workers

By Lt. Cmdr. Jensin W. Sommer, USS Shreveport  
Public Affairs

**NEW ORLEANS** – Not all relief work by USS Shreveport (LPD-12) Sailors in St. Bernard parish has involved tramping in mud, handling shovels and hoses or hauling boxes of supplies. For the ship's six hospital corpsmen, their efforts have been more narrowly focused on giving immunizations to more than a thousand local and federal relief workers.

Operating initially out of a pierside warehouse and then the parish Emergency Operations Center (EOC) at a nearby oil refinery, the corpsmen worked in daily shifts to provide Hepatitis A, Hepatitis B and tetanus shots to Marines, National Guardsmen, sheriffs, firemen and Federal Emergency Management Agency (FEMA) personnel. Some evacuees and media members also benefited from the free inoculation service.

Relief workers are particularly vulnerable to illness and disease because of potential exposure to blood, fecal matter and rusted sharp metal in the mud and ruins, according to Chief Hospital Corpsman Sequiel Agustin.

"These immunizations will protect them from some of the hazards they face," Agustin said. "Depending on how up-to-date their shots were, not everyone needed all three."

Over 13 days, the corpsmen inoculated more than 1,100 people for a total of over 1,600 shots. It would have been impossible to serve all these people without the Navy's help, said Dr. Ken Iserson, who deployed with the Arizona Disaster Management Assistance Team in direct support to FEMA as chief of the EOC's medical clinic.

"This has been an absolute joint effort with the Navy jumping right in to give us the help we needed," he said. "These Sailors have been amazing."

## Marines Face New Enemy - Cholesterol

By Lance Cpl. Lukas J. Blom, Marine Corps Air Station Iwakuni

**MARINE CORPS AIR STATION IWAKUNI, Japan** - Marines have always been considered an exceptionally fit group of individuals. The physical requirements one must possess to even earn the coveted title is a test of human endurance and strength. As a Marine continues down the green path he or she is expected to keep a certain level of physical prowess, which will help him or her stay alive on the battlefield. Although in tip-top shape, this physically elite group is in the sights of a silent and deadly killer – cholesterol.

Cholesterol is a soft, fat-like, waxy substance found in the bloodstream and in all the body's cells. It's normal to have cholesterol and it's an important part of a healthy body because it's used for producing cell membranes and some hormones, and serves other needed bodily functions, according to the American Heart Association. Excessively high a level of cholesterol in the blood can lead to coronary heart disease, which will eventually cause heart attack. It's also a risk factor for stroke.

"To make an intelligent assessment of one's cholesterol level, an entire panel of values is required including, but not limited to, total

cholesterol (TC), triglycerides (TG), high-density lipoprotein (HDL) aka 'good cholesterol', low-density lipoprotein (LDL) aka 'bad cholesterol', and very-low-density lipoprotein (VLDL)," said Cmdr. Michael M. Jacobs, Marine Aircraft Group 12 group surgeon. "The bad, or sticky, cholesterol molecules adhere to an arterial wall and create an obstructing plug of material called plaque, that decreases blood flow and oxygen delivery to the heart muscle, and so forth."

Cholesterol is a dangerous affliction because it goes virtually unnoticed until the damage is irreparable.

"Sadly, there are no reliable early indicators of dangerously elevated cholesterol," said Jacobs. "It's unfortunate that abnormal cholesterol values, as well as high blood pressure, are not associated with pain or obvious warning signs.

There is a considerable number of individuals who live and work on Station who have untreated abnormally elevated cholesterol and blood pressure."

Although some are genetically predisposed to high cholesterol levels, all too often we are our own worst enemy when dealing with cholesterol.

"The tragedy of vending machine products and fast food availability is distressing," said Jacobs. "We must reinforce the necessity of



**Cholesterol Levels:**  
-Less than 200 is best.  
-200 to 239 is borderline high.  
-240 or more means you're at increased risk for heart disease.

169 285

**MARINE CORPS AIR STATION IWAKUNI, Japan**—Two young Marines, of the same age, finish up their morning run on the seawall. Although both partake in day-to-day physical training, one is in danger of being a casualty of a fierce enemy, cholesterol. A fatty diet may please the taste buds, but beware of the toll the body takes as a consequence. *U.S. Marine Corps*  
Photo by Lance Cpl. Mark Fayloga

making wise, healthful dietary choices. For example, vending machines in family housing encourages unhealthy choices among our most vulnerable population - children and teens. The obesity and diabetes epidemic in America is absolutely linked to over consumption of high fat, high sugar, caloric dense, processed foods. The short and long-term burden on our health care system is staggering to contemplate."

## New Navy Chief continued...



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Martinez said he also looks forward to embarking on the new mission of getting back to his normal life at home and at work in Navy Medicine. After finishing his final treatment, doctors will test his bone marrow to see if he is healthy enough to leave the hospital. Martinez said without a bone marrow transplant, he has an 80 percent chance of relapsing. Nonetheless,

he remains confident of his personal and professional future.

"I'm going to take my 20 percent chance and just go with it," Martinez said. "I think everything happens for a reason... I love my life and I love my wife and kids, and I believe I will get healthy.

"My goal," Martinez added, "is to stay in the Navy as long as they'll let me."

Got News? If you'd like to submit an article or have an idea for one, contact MEDNEWS at 202-762-3218, fax 202-762-1705 or [camahoney@us.med.navy.mil](mailto:camahoney@us.med.navy.mil).